Congratulations to NOSORH for another successful National Rural Health Day!

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Historically significant election

- Never has there been a President with no political or military experience.
- Conventional wisdom out the window. Polls, pundits, media - - all wrong.
- Despite President Obama's high favorability, he now has lost more Democratic congressional seats than any other Democratic President.
- Rural vote had a significant impact.

"Rural Vote Fuels Trump; Clinton Loses Urban Grip" wall Street Journal, Nov. 9



Rural America Speaks Loudly

- "Hillary lost rural America 3 to 1. If she lost rural America 2 to 1, it would have broken differently,' said a Democrat inside the Clinton campaign." *Politico*, 11-16-16
- President-Elect Donald Trump never issued any specific rural policy agenda, yet captured astonishingly high rural voter turnout:

20% of the nation lives in rural America - - according to exit polls, rural voters

made up 17 percent of the electorate.





Washington is Listening...

- The Power of Rural
- Significant opportunity on Capitol Hill and with the new Administration
- Debate will begin on how to reinvigorate economic development and infrastructure across the nation, it's imperative that we remind our leaders that rural healthcare is the critical component to a vibrant rural economy:
 - You can't have a healthy rural economy without a healthy rural community.
 - Quality rural healthcare saves lives, provides skilled jobs, attracts businesses, and reinvests millions back into rural communities.
- No matter what side of the political aisle you sit on, now (with the national media and the politically powerful paying attention to rural), is the time to make our rural voice heard.

Impact of ACA on the Election

- HHS announced exchange plan premium increases of average of 25%.
- Large insurers continue to drop out of exchanges: Cigna is latest to exit certain markets, citing lack of profitability:
 - "We viewed the opening of this marketplace...as probably being much smaller than projections and not profitable for the industry..." said Cigna President and CEO David Cordani.
- Significant Campaign Issue:
 - Wisconsin: Democrat Russ Feingold cast the deciding 60th vote for ObamaCare and voters elected him out in 2010. In 2016, expected to regain his seat - - but lost.
 - In Arizona, premiums will rise a mind-boggling 116%, only two insurers are still selling plans - - John McCain made ObamaCare a major theme.

What will happen to ACA under President Trump

- Repeal and replace the ACA.
- Permit insurers to sell health insurance across state lines
- Likely use Reconciliation procedures to repeal significant portions of ACA.
- House Republicans: "A Better Way" <u>https://www.gop.gov/tag/a-better-way/</u>
- What about payment transformation - from volume to value? Medicaid expansion?
- Executive order actions.
- Senator Thune (R) will take lead in Senate's efforts to repeal and replace ACA.

Trump and ACA - - Some things to remember

- <u>Tough to repeal a benefit</u>. Difficult to completely repeal the law due to political backlash from suddenly ending ACA coverage for an estimated 20 million Americans would be too great.
- <u>Expensive</u>. It's not clear whether or how a Trump administration would provide subsidies to help people buy or keep coverage. The House Republican leaders' plan proposed refundable tax credits for individuals without access to employer-based or public coverage.
- <u>President-Elect Trump</u>: Supports a replacement in effect prior to any repeal.
 Stated support for pre-existing condition benefit and parents' ability to provide coverage for older children.
- Early ACA items to go: IPAB, CMMI?
- <u>Impact of 340B Drug Program on rural providers</u>. Included in ACA, cost-saver, but historically Republicans have opposed.

Issues for the new Congress and Administration



NATIONAL RURAL HEALTH ASSOCIATION

Rural Health Issues (and opportunities) for the New Administration

- Budget critical rural health issues, strong State
 Offices funding
- Hospital Closure Crisis
- Health Reform Issues
- Tax Reform
- Regulatory Relief



 NRHA Action: Letter to transition team, meeting with HHS offices.

Demand for Regulatory Relief

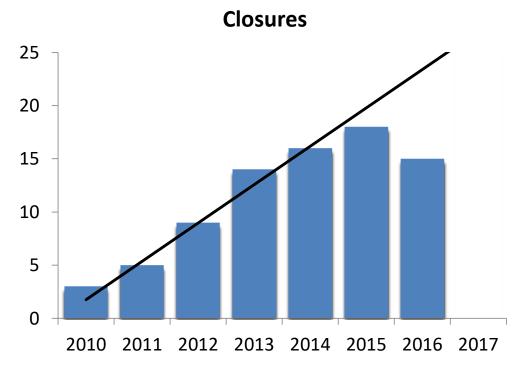
- Common-sense approach needed for "exclusive use" standard.
- Critical Access Hospitals (CAHs) and many Sole Community Hospitals (SCH) should be Eligible for Indirect GME (IME).
- Performance Comparisons Should Occur Between Equivalent Cohorts in MIPS
- Implementation of the Section 603 Site Neutral payment for new off-campus provider based department (PBD) harms rural providers.
- Hospital Star Rating treats Rural Hospitals Unfairly. Rural Relevant Measurements Needed.
- Elimination of the 96 hour Condition of Payment requirement reduces unnecessary red tape in line with the congressional intent in the creation of the CAH.
- Changing the supervision requirements for outpatient therapy services to general supervision from direct supervision protects patient safety and access.
- Improper MAC denial of Low-Volume Hospital Adjustment

Rural Legislative Issues for the New Congress

- Strong funding levels for the Rural Health Care Safety Net Programs
 especially State Offices.
- Ensuring health reform works in rural America - protect:
 - Critical cost-based rural funding and other rural payments;
 - 340B drug program;
 - Rural Medicaid equity;
 - Insurance coverage that works in rural America.
- Equitable rural MACRA implementation. See new NRHA guide.
- Rural Medicare extenders set to expire Sept. 30th, 2017.
- R-HoPE Act
- Save Rural Hospitals Act



Rural Hospital Closures on the Rise



At this rate, 25% of rural hospitals will shut down in less than 10 years.

^{*}Even if legislative action is taken today, if it takes as long to implement the Community Outpatient Hospital as it took from the implementation of the CAH from a demo to the first certified CAH (10 years), 485 hospitals will be closed.



"When rural hospitals close, towns struggle to stay open."



Save Rural Hospitals Act, HR 3225 -



Rural hospital stabilization (Stop the bleeding)

- Elimination of Medicare Sequestration for rural hospitals;
- Reversal of all "bad debt" reimbursement cuts (Middle Class Tax Relief and Job Creation Act of 2012);
- Permanent extension of current Low-Volume and Medicare Dependent Hospital payment levels;
- Reinstatement of Sole Community Hospital "Hold Harmless" payments;
- Extension of Medicaid primary care payments;
- Elimination of Medicare and Medicaid DSH payment reductions; and
- Establishment of Meaningful Use support payments for rural facilities struggling.
- Permanent extension of the rural ambulance and super-rural ambulance payment.

Rural Medicare beneficiary equity. Eliminate higher out-of pocket charges for rural patients (total charges vs. allowed Medicare charges.)

Regulatory Relief

- Elimination of the CAH 96-Hour Condition of Payment (See Critical Access Hospital Relief Act of 2014);
- Rebase of supervision requirements for outpatient therapy services at CAHs and rural PPS See PARTS Act);
- Modification to 2-Midnight Rule and RAC audit and appeals process.

Future of rural health care (Bridge to the Future)

Innovation model for rural hospitals who continue to struggle.

Potential Rural Champions?



Rep. Jodey Arrington (R-KS) elected to represent Texas's 19th district, would be the first telemedicine expert in Congress, and promises to be a voice for rural community hospitals. "Without the health care infrastructure, there is no small town America," he told *Politico*, "and there is no population to support the food, fuel and fiber production for our country."

Sen. Maggie Hassan (D-NH)) – as Governor she worked to increase funding for community-based mental health care.

Rep. Roger W. Marshall (R-KS) elected to represent the 1st Congressional District of Kansas., is an OB-GYN in Great Bend and has served as Chairman of the Board of Great Bend Regional Hospital for 14 years.

Obama Presidency/Rural Legacy

- Affordable Care Act
- White House Rural Council
- CMS Rural Council
- Growth in loan, telehealth and CMMI rural experiments.



Policy Institute February 7-9

Washington, D.C.

- Washington is listening.
- Join NRHA and your fellow rural champions for the most important Policy Institute to date.
 - Engage
 - Educate

For more information: www.ruralhealthweb.org

